

CLAIMS ONLY							Application Number <u>10/462374</u>	Filing Date			
							Applicant(s)				
CLAIMS AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1	/						51				
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46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep							Total Indep				
Total Depend	7						Total Depend				
Total Claims	8						Total Claims				